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ORIGINAL ARTICLES.

REMOVAL OF A BULLET FROM A MAN'S HEAD FOLLOWED BY A COMPLETE RECOVERY.

By C. S. SARGEANT, M. D., STOCKTON, CAL.

On the fourth day of October, 1888, I was called to see Mr. M——, who was suffering from the effects of a pistol wound.

He gave me the following history. About the last of August, 1888, while a friend was toying with a number 38 Calibre Smith and Wesson pistol, it was accidentally discharged. Mr. M—— was distant only some three feet, the bullet entered the right side of his head just above the right eye, he was in a profound coma for four days and delirium followed lasting one week. The face and eyes were badly burned by the powder and intense inflammation of the right eye followed the injury.

When I first met him the sight of the right eye was completely destroyed.

Upon a careful examination I discovered a slight elevation or ridge just above and anterior to the external auditory meatus and judging from the position in which the two men were standing at the time of the accident and the symptoms

following, I took it to be the seat of lodgment of the missile. He was suffering from intense hemicrania of the right side and felt dizzy at times.

I advised an operation and attempt to remove the bullet, to which he consented.

After placing him under an anesthetic I cut down immediately upon the suspected spot and found the ridge or elevation to be due to a fractured table from pressure within. I enlarged the opening in the table and found the inner table was also fractured, corresponding with the fracture of the external plate and resting upon the dura mater at this place was a portion of the bullet, which I extracted with but little difficulty.

After removing all spicula of bone and loose fragments, I introduced a few strands of catgut to the bottom of the wound to serve as a drainage and put in three sutures leaving the wound open where I brought the catgut out. He recovered completely from the operation with no untoward symptoms, completely free from pain and dizziness from the moment he came from under the anesthetic.

Union by first intention except at the spot my drainage prevented and that healed in a very few days by granulation. I used one to three thousand of Bichloride thoroughly throughout the operation and in after dressings.

The interest in this case lies chiefly in the course the bullet must have taken and the slight amount of damage done.

A cicatrix was to be seen just above the supraorbital notch of the right eye, between it and the superciliary ridge, showing the point of entrance and in order to be found where it was it must have taken a backward, outward and downward direction through the frontal sinus, traversing the greater wing of the sphenoid and lodging in the fossa of the squamous portion of the temporal bone, at the root of the zygoma, just above and in front of the external auditory meatus, fracturing both tables at the seat of lodgment, the bones being considerably comminuted at this spot.

The fragment of the bullet removed weighed sixty-two grains. A Smith and Wesson bullet 38 calibre should weigh one hundred and forty-two grains.



The bullet in its course injured branches of the ciliary arteries, veins and nerves, giving rise to considerable hemorrhage into the ball of the eye. The optic nerve was uninjured at the time, the bullet passing above and to the outer side.

Infiltration of blood into the tissues around and the resulting inflammation with laceration of the parts near the optic caused the loss of sight.

CASE OF EXTRA-UTERINE PREGNANCY.

By ELIZA I. BEACH, M. D., PASADENA, CAL.

Mrs. P——, age 26, was first seen by me December 17, 1887. Found patient in bed vomiting, which had continued for four days at intervals day and night, accompanied by intense cramping pain in stomach. Ejected intensely acid undigested food, bitter green matter, and hot fluid. Bowels constipated; temperature $102\frac{1}{2}^{\circ}$, pulse 128; skin hot and dry; very thin in flesh; face pinched. Found abdomen enlarged and hard tumor in right iliac region. Uterus $6\frac{1}{2}$ inches above pubic arch and 5 inches across fundus. Ordered Ars. 3x and Nux 3x every hour.

Gathered the following facts concerning previous history of patient. Had been feeble from childhood, had had two accidents (falls from carriage), and one serious illness from malaria. Had a child living, aged 7, and had had two miscarriages, each at 3 months, the last being three years previous to the time patient was seen by me. She had already consulted five physicians. September 10, 1887, cervix was dilated for anteversion, followed by what the attending physician called a miscarriage. She had also been aspirated for left ovarian cyst. Case had been diagnosed as Prolapsus with Metritus, and as ovarian abscess opening into bladder. Patient herself believed that she was pregnant.

December 18th—Vomiting controlled; temperature 101° ; pulse 120.

December 19th, 20th, 21st, 22d—Each day slight improvement.

December 23d—Pain in right hypogastrium, extending to median line. No marked tenderness or increase of temperature. Pain spasmodic and expulsive. Careful examination revealed suspicion of extra-uterine pregnancy.

December 24th—Vomiting. Pain continues. No marked increase of temperature (90°), or pulse (99). Called Dr. Rachael Gleason, who could not make a sure diagnosis. Ordered hot baths, foment, etc.

December 31st—Slight improvement. No more nausea. Sleeps very well. Awakes with fright. A tight feeling in throat.

January 1, 1888—Had a child at 3 A. M., followed by heat and sweat. No increased soreness or change of pain.

January 2d—Chill. Pain like labor. Still think it tubal pregnancy.

January 3d, 4th—No more chills. Still the pain.

January 5th—Called Dr. Van Slyck in consultation, who thought it an ovarian cyst. Agreed that, in either case, an exploratory incision be made. Consulted Dr. Wise, who decided to make the incision.

January 6th—Pain increased. Expulsive efforts at intervals, with haemorrhage from rectum.

January 7. 4 A. M. A five months foetus expelled through rectum. Exhausting haemorrhage. 1 P. M. patient died.

January 8th—Post mortem revealed left tubal pregnancy. Extensive adhesion among pelvic and abdominal viscera. Rupture in descending colon. Descent through rectum and out of anus.

PHTHISIS PULMONALIS—HOT DRY AIR OR HOT MOIST AIR?

By S. L.

Drs. Halter and Weigert, of Germany, dispute in the *Berl. Klin. Wochenschrift* about the priority of hot, dry air treatment in phthisis. The former experimented in Lime-Kilns and found that none of the laborers ever suffered from phthisis, because the air is very dry in and about the Kilns and bacilli cannot thrive in a temperature of 50° C., and

over. Weigert goes it one better and makes patients breathe hot air from 60 to 80° C., and found that it can be inhaled for several hours daily with steady improvement, the bacilli finally disappearing entirely.

Other German physicians recommend, on the contrary, hot moist air. Krull published in the *Berl. Klin. Wochenschrift* 39, 40, his apparatus for inhaling moist hot air and gained most success from inhalation of 42 to 46° and repudiates inhalation of a higher temperature. All his patients improved, as even during the inhalations no irritation to cough was observed and though some of his patients exposed themselves during the winter to atmospheric influences, none suffered from a laryngeal or bronchial catarrh. He finds his treatment contraindicated in far advanced cases; when syphilis preceded or accompanies phthisis or where consumption and albuminuria go hand in hand, and gives for those suitable to the treatment, the following rules: 1. Breathe naturally without any exertion, as the hot air penetrates deep enough into the lungs. 2. One sitting a day suffices, as the best time for it is between 7 to 8 A. M., and better still between 5 to 6 P. M. 3. Begins with temperatures of 41 to 42 and found most benefit from temperatures between 43 to 46 and gradually, as improvement progresses, return to the lower grades. Inhalations ought never to last longer than 30 to 40 minutes. Strong afebrile patients can stand forty minutes, but in weaker ones half an hour suffices. Immediately after the inhalation the patient closes his lips so that the cold air can only come in through the nose, breathing only through the nose, abstaining from all talking for at least half an hour and lie down on a couch, sufficiently covered. To undress and to go to bed immediately after an inhalation is injurious; and no less so to walk about. Even in favorable cases a fever arises or a present one increases somewhat, but in a few days increased expectoration follows, a decline of the fever can be expected, and, where it keeps on, the temperature of the inhalations must be lowered, or inhalations only every other day given. About an hour after an inhalation easy and increased expectoration follows in rare cases, sometimes mixed with blood. Too copious sputa with increasing fever and de-

crease in weight contraindicate inhalations. Our patients must enjoy the fresh air as much as possible, but in moderation no over exertion! Even in winter they must go out, but with mouth closed and breathing only through the nostrils. When inhaling in the afternoon, he better remain in doors during the evening in winter, but in summer he goes out, and during the cold season the windows ought to be closed at night. In relation to diet experience shows that animal food and too much nitrogenous nutrition is injurious to phthisical patients, nor ought they be allowed to indulge freely in alcoholic beverages. Tepid baths act well, but keep away from cold douches and frictions. Inhalation treatment can only be thoroughly practiced under the supervision of a physician, and even after the patient may be considered cured the inhalations at intervals ought to be kept up for some time.

IS IT POSSIBLE TO ERECT A HIGHER STANDARD OF MEDICAL KNOWLEDGE IN THIS AGE?

BY S. S. GUY, M. D., SAN FRANCISCO.

II.

In following up the subject commenced last month, permit me to observe that I make no pretention to an exhaustive discussion, but my chief hope and purpose is to concentrate more fully the attention of the profession to the importance of deeper reflection upon the all-important questions involved; and, thereby—if possible—to open up a wider and more expansive horizon for observation and thought in the direction and in the field which belongs to the science and true art of healing.

If the few statements there made regarding the obstacles to real progress in medical science and art are founded on true facts, then it behooves us all to be on the alert to discover a better and truer way. Also towards all of the attempts in this direction, however feeble and by whomsoever made, there should be extended the utmost charity and encouragement.

Ever since Sir Francis Bacon clearly made known to the learned world in his "Novum Organum, etc.," what he conceived to be the true philosophy under-lying all scientific development, and in which he intended to replace the scholastic logic represented in the Organon of Aristotle, the leading minds in the scientific world—so-called—have been actuated in their investigations by the principles therein laid down. Inductive philosophy has borne sway in nearly all efforts to pry into the secrets of the natural world; *from effects to causes* has been the watch-word, and men have gone on piling up the results of their labor in this direction until the mass of scientific conclusions reached is simply enormous, and the material results flowing from them have laid substantial foundations on which may rest in the near future the glorious and symmetrical structure of the temple in which *real science* and a true philosophy shall be developed to the wondering world.

But this reasoning from effect to causes, while it formed a foundation—as above stated—has had the effect to stunt the growth of all genuine philosophy, and relegate it to a new set of thinkers. It has led its investigators to stop short in the midland of proximate causes and to be satisfied with materialistic results. The proclamation of agnosticism has resulted, and our leading scientists *don't know*. They imagine it possible that there may be something beyond but are not quite sure, and on the whole regard it safe to fall back on the idea that after all, power is stored up in what they are pleased to call force; and that somehow or other, by certain inherent principles this force is set in motion and that it operates upon certain laws enacted by their principles, and thus acts upon matter to produce all the stupendous results we behold in creation! *Mirabile dictu!* Now, in reasoning from effect to causes, our philosophers leave out one of the most important factors in the ratiocinative process.

Three terms are necessary in true reasoning; either being left out, the process becomes defective. These are cause, effect and end. This brings all processes to result in a circle. A circle is complete and has no beginning nor end. Now the end is the first principle in which also resides the proximate cause, and to which, as a finality, the effect returns,

when the process is completed. Without an end nothing can possibly exist. This end then is the primal cause which rules throughout the process.

The agnostic or materialistic philosopher virtually ignores the true primal cause and insists that he cannot go beyond the proximate cause. It is plain then that this limping logic must necessarily lead to false conclusions.

Let this reasoning now be applied to the leading medical scientists as to the results of their investigations, and it will readily be seen where they stand, and why medical science is so defective, and its applications so unsatisfactory.

What must be done then, to rectify this unfortunate state of affairs?

The true study of mankind is Man. Not this mere dead, physical body alone, for that has been ransacked to its extremest limits to produce the shells and forms of knowledge which we already possess, and which forms the basis of the ponderous tomes in which is found portrayed our present science of Medicine.

Nor alone the five delicate senses of the *living* body, for they but take cognizance of *material* things, and enable us to get but little further on in our researches after living truth in its higher forms.

No, they even do not of themselves take cognizance of anything. They are but sensitive instruments, mere vehicles through which are gathered the *appearances* of facts from the outer or phenomenal world. They are but parts of the material body, which of itself has no life, and, therefore, no inherent ability.

This is evident from all experience. For when the life—or whatever we may name the principle that actuates it—leaves the body we know that no inherent power dwells there which is able to restore it again to activity.

This leads us to inquire further as to the properties and qualities of this power that sets in motion all the forces we see exhibited in the living being. The first quality to be noted is self-consciousness. This may be properly expressed in the terse aphorism, *cogito, ergo sum*. Then comes memory, or the quality that enables us to store up the imagery of things we cogitate, or which we perceive

through the medium of the senses. Then the faculty to recall those images, and the ability to arrange them in orderly relations, to compare these relations and abstract their properties and qualities and deduce from them ends or uses; in other words the faculty of reasoning. Whence come all these wonderful powers? Are they derived from inert matter or from stored up force? We do not see that experience and observation teach this, but rather the contrary. If so where shall we look for them. We must evidently look for them beyond or outside of mere materialistic conditions.

This leads us to consider if there be any beyond or outside the scope of the senses attached to the material body.

Men have lived in all ages of the world and now live who hold that the negative of this proposition is true.

I might adduce a thousand proofs which have been developed in modern times to substantiate the affirmative of the question, but doing so would lead to a range of discussion into which I prefer not at present to enter. Besides, my aim is not simply to try to convert bald and outright materialists, but to endeavor to lead back those who have been lead partially away from the truth by the sophistical reasonings of the materialistic philosophers. Persons, who, if openly charged with a tendency to adopt those ideas, would wonder how you could even insinuate such a thing. Nevertheless, I know many of this class—some among foremost teachers, whose minds continually tend in that direction.

We might adduce many arguments which would go to prove the existence of a world beyond and outside these material worlds, but the field has been so thoroughly cultivated that it would be a tiresome repetition to go over it again.

I shall therefore, for the purposes of these papers, take it for granted that my readers generally will agree with me that there is a world of real and substantial entities, besides this one, which apparently is seen and known only through the senses of the body.

Nevertheless, it must be observed that this other, and perhaps more properly named, *inner* world, has a direct and intimate relation to this outer world. Indeed, it might be said and truly, that in a certain sense, they stand in relation as cause and effect. But more of this anon.

It is conceded by the most materialistic philosophers that a time was when this material world was not, at least in its present form, but was incoherent and nebulous, and was but slowly concreted and brought into form by consecutive operation of forces through long ages, if not eons of time. Who can tell, that by tracing it backward from the nebulous condition through equally vast eons it might not be found to have originated in something infinitely more refined than the vaporous nebulae? Go further back and you may find the primal cause and essence of it all in the form of pure spirit. Reasoning alone from analogies existing in the common human mind even, and we shall be nearly, if not quite, forced to this conclusion. But if we deemed it wise to adduce the proofs referred to above, they would be sufficient to confirm this conclusion beyond question. Still the time is not yet, and we must move discreetly. The minds of men are being opened gradually to a reception of these minor truths, and little by little they must be insinuated into them.

As said above, the things of this external world are but the *forms* for the reception of truths, all of which really came from that other world of causes which lies within and beyond the natural.

If this shall be received, then we are prepared to advance a little step further, and to affirm that the human being lives at the same time both in the natural and spiritual worlds, and that as to his real substantial self, he is altogether a spiritual being, and is capable of maintaining his individuality and identity after he leaves the material body.

In the preceding section of this paper we endeavored, in our reasonings and statements, to show that the primal or real actuating causes of things, so far at least as they relate directly to the phenomena of the material world and to the natural plane of being, lay entirely beyond the but proximate causes which are regarded by the materialistic philosopher as final, and beyond which they are not able to penetrate.

In order to concentrate our thoughts and bring them into a more orderly and tangible form we will take as the pattern for illustration of our philosophy man as he appears to us to-day.

What then is man as to his essence and development?

Man appears as a trichotomous being. Not as a most illustrious philosopher of the preceding century formulated him, as consisting of *spirit, soul and body*, but we much prefer the conception as expressed in the Greek of the New Testament, namely, *pneuma, nous, and psuche*, "the body being no part of man's true nature."

Literally and in a natural sense, *pneuma* means *the air we breathe or respire*. Also *respiration, breathing*. This is well attested by the meaning of all its derivatives. But it also has a still higher and more interior meaning; as, *the spirit, a living being*. It is equivalent to the Latin *anima*. A still more exalted meaning is also given it. It is clearly defined to signify and express the terms, *spirit, spiritual being*. Thus we see it carries in it the idea of that in man which is most exalted and supreme. The second term *nous* or *noos*, literally, signifies *mind, turn of mind, disposition, mood, temper*. It also expands to include the *understanding and reason, judgment, discretion, sense, power of thought, strength of mind*. This is equivalent to the Latin *mens*. *Psuche*, *life, soul, spirit*, (in its animal sense), also *sensual, desire, propension, appetite*, etc., and is equivalent to the Latin *animus*.

In this discussion we shall adopt the Latin terminology as more convenient.

We shall say then that man consists of an *anima*, a *mens* and an *animus*.

The *anima* is that inmost part of man that is usually designated as spirit. This so far as concerns man as an abstract being or as severed from any *higher* relations, is his supreme principle or that which does or may dominate all below it. It may be said—in a restricted sense—to be the creator of the body and the sustainer and director of all of its life-animating processes. For the present then we shall treat of it in this sense.

The first intelligent inquiry that projects itself into or upon the mind is how or by what means this highest principle comes into contact or relates itself to more external elements so as to be able to carry on the work of creating the body? Here I perceive that it will be difficult to proceed upon this separated plan of discussion without in some measure misleading the mind, unless some allusion is made

to a *supremest* power which exists some discrete degrees above the plane of being which we are now considering, and yet in a sense permeates all, and to whose *supreme power* and jurisdiction we shall ultimately be obliged to refer all things which we are permitted to consider and discuss.

When I say the spirit is the creator of the body I must not be understood as saying or suggesting that it originates the least element of the being. It stands for or is a procreator, nevertheless, it works and acts as if from itself in the restricted sense referred to above.

How far the *mens*, as a differentiated entity, enters into the work carried on by the spirit, and assists in the process, would form the basis of an interesting discussion. However this process may be set up, whether it develops *pari passu* with the body or whether it be a completed creation awaiting its nexus with the soul of the body at an appropriate time, matters little to my present thought. That which corresponds to its highest plane of action does certainly inhere in the *anima*. This is evidenced in all the processes which go on in the creation of the body. Differentiated intellectual movement is everywhere prevalent. What mechanical skill in the arrangement of the bones and muscles, the arteries and veins, and above and over all, what marvelous delicacy and skill is everywhere manifest in the complex structure and offices or functions of the brain and nervous system! We need not enlarge here for everything in nature conspires to emphasize and make clear our proposition.

But the subject here spreads out and enlarges to such a degree that it is difficult to limit it within bounds consistent with the end we have in view.

Whatever be the process or evolution by which the *mens* is set up or established, it appears clearly to me to be of a dual nature. In other words, it has two distinct planes of activity. One we will designate the spiritual and the other the natural or animal plane. One attaches to and is made the servant of the *anima*, while the other is similarly related to the *animus*.

If these positions are sound and well-based it clearly establishes man's trichotomy.



But you will ask me to do more than to merely state my proposition.

If the *anima* or spirit is the evolutionary force which projects the being into external or physical existence, how is it made manifest?

In considering some of the evidences which seem to sustain this position, we may ask for a wide latitude, but we will try to keep within the record of tolerably well-established principles of science and philosophy.

Nevertheless, we may feel obliged to present some phases of truth that are not universally accepted. Be this as it may, we shall be perfectly willing to let every presentation stand upon its merits and be subjected to whatever of criticism it may draw forth, as our supreme object is to elicit the highest truth and set it forth in the clearest manner.

If at times there is an appearance of discursiveness, we must be pardoned, for the subject is vast and far-reaching, and to be made reasonably clear, must be examined from many, and seemingly diverse standpoints. Notwithstanding this we promise to bring you safely back to the point whence we set out.

Everything that has life in the natural world is propagated from seed or from a seminal concretion or center of activity. This seed must be surrounded by certain conditions before it can become prepared in any way to become fecund. And then certain other conditions must be successively brought to bear in order to complete the process and to produce or bring forth the living thing or being. These conditions, then, are the tools of the creating power.

In their cor-related and continuous order they furnish complete and irrefragible evidence of a supremely intelligent power in operation in the process. This process may be said to be practically uniform in all departments of living creations, from the protozoa to the most exalted, that of Man.

The potter has power over the clay to mould it into whatsoever form he pleases. The extent and qualities of the intelligence and power used is always made manifest in the character of the productions brought forth. What then must be the quality and power of the intelligence and wis-

dom that brings forth such a stupendous creature as man? Look at him simply as a physical being, as a mere congeries of mechanical structures and adaptations and one becomes dazed and bewildered in its contemplation. Has any man yet been able to imitate perfectly even its *mechanical* structure, to say nothing of setting it *functionally* in operation.

This is said of man as a mere material and physical being, and if it is true it forces us into another realm of being for materials from which to construct even a plausible theory on which to account for the living miracles which are thrust upon us at every turn.

But man is more than a mere physical being and in order to account for one ten-millionth part of what we behold even through our natural senses we must contemplate him in the higher aspects of his nature.

NATRUM PHOS.

The *Medical Era* for November contains Dr. W. H. Hall's experience with the above remedy. He prescribes it for the following set of symptoms: Pain coming on an hour or two after eating, burning in the stomach, erructations of gas and some fluid. The trouble appears regularly and it makes no difference whether the patient eats much or little. The Doctor in such cases prescribes the 3X with success.

The following cases are illustrations:

I. Patient with troublesome burning in the stomach after eating, and continuing almost to next meal time, and pain developing one or two hours after meals; tongue light gray. No bad taste. No tenderness, bowels regular and stools normal. No thirst. The burning was so troublesome as to keep him awake at night. Natrum Phos cured.

II. Child with indigestion after Typhoid fever. Everything soured in his stomach, breath sour, vomited curdled milk and sour smelling fluids, green stool alternating with constipation, was troubled with colic, white coated tongue and was white around mouth, fretful, cross and restless. Natrum Phos cured.

Worms: Two cases of pin worms with itching at anus were cured by the same remedy in the 6x.

OPHTHALMOLOGY AND OTOTOLOGY

DEPARTMENT CONDUCTED BY H. C. FRENCH, M. D.

THE EAR AND ITS DISEASES, being Practical Contributions to the Study of Otology, by Samuel Sexton, M. D., Aural Surgeon to the New York Eye and Ear Infirmary; Fellow of the American Otological Society; Fellow of the New York Academy of Medicine; Member of the Medical Society of the County of New York, and of the Practitioners' Society of New York. Edited by Christopher J. Colles, M. D., Octavo, 473 pages. Numerous Illustrations. Extra Muslin, \$4.00. New York: William Wood & Company.

In a recent number of THE CALIFORNIA HOMŒOPATH, our readers were introduced to Dr. Samuel Sexton, as the author of an excellent little work on the ear, contributed to the Leisure Library series of George S. Davis & Company, of Detroit. All the good things we were, by its merits, constrained to say of his minor work, we can conscientiously repeat, and with greater emphasis, of the major one. The work is written in four parts, and its arrangement is natural and philosophical. The complex anatomy of the ear is brought down to the comprehension of the general profession, without the omission of any essential facts. Its ætiology is exhaustive and practical, avoiding those abstruse theories that encumber so many works of this class. The treatment is conservative, bringing to the aid of the practitioner the experience of the best authorities of the old school, and all the latest appliances of the aurist, which the publisher brings before the reader by the aid of most excellent illustrations. The author by a careful selection of clinical cases, has presented under each disease almost every phase of aural pathology to be found in that class, with its treatment. If the book were fortified with the Homœopathic Materia Medica, as a text book of otology it would leave nothing to be desired. This book is in every respect up to the highest attainments of a rapidly-advancing branch of medical science, and without hesitancy we can recommend it, as in the front ranks, as a text book.

Colleges, Hospitals and Societies.

FIFTH ANNUAL COMMENCEMENT.

The fifth annual commencement exercises of the Hahnemann Hospital College were held at Odd Fellows' Hall, November 1st. A large audience was in attendance. A class of nine, whose names appeared in our last, received the degree of Doctor of Medicine. The address of the evening was delivered by the Rev. J. A. Cruzan, and was a most excellent one. The music was an interesting feature; that by the Mandolin Club being especially fine. After the exercises, the faculty and graduates repaired to the Baldwin, where a sumptuous *table d'hôte* awaited them. Toasts were responded to, and a poem, read by its author, Professor H. C. French, was loudly applauded.

THE MEDIC'S DREAM.

By H. C. FRENCH, M. D.

[Read November 1, 1888, at the graduating banquet of the Hahnemann Medical College of San Francisco, Class of 1888.]

What power mysterious draws our hero on,
Through blood, and stench, and labor never done?
What subtle halo is it lights the goal
Whose bright mirage still lures his restless soul?
Is it the hope of gain, a dream of fees?
His pay will prove too oft a dream, that flees.
Of wealth in solvent promises and bills?
Alas! for mortgages on swallowed pills.
Perhaps 'tis glory of the doctor's life—
The thrilling music of its varied strife?
Ah! merry cadences of broken bones,
Of pain and groanings, rapturous in tones;
Whose cheerful score still stretches sweetly out,
Through tic, angina pectoris and gout.
How great the public trust on doctors cast;
Yes, on his ears fall slanders thick and fast;
Unwilling umpire in the endless trail
Of petty rows that stir his patrons frail;
In his indulgent ear is ever found,
For scandal's bric-a-brac, a dumping-ground.

Through precious hours, enrapt, intranced, enchained,
He sits, while paying patients are detained,
A prisoned auditor of endless woes—
Of pains and aches, and cramps and conscience-throes,
Whose cheerful list reaches to ages gone,
Invades ancestral graves, and, one by one,
Recounts anew hereditary ills,
Outnumbering e'n their unreceipted bills (?)

Our Medic dreams of rest and leisure hours,
And nights of sweet delight in lethean bowers:
The festive jingle of the glad night-bell,
Its sharp, persuasive, peremptory swell,
Sends through the happy doctor's spine a thrill,
Whose force suggests an allopathic pill.
His leisure all too great when rest was pain,
His leisure all too small when rest were gain.
His devious paths in paradox abound—
His chiefest joy in misery is found;
For who, in all our impecunious ranks
But takes, whene'er he may, a fee, with thanks?

There is a fee which angels hedge around
With jealous care; a treasure only found
Where midnight sorrow broods o'er squalid bed,
From which pale dying lips in whispers plead
For that small boon man's meager skill can lend
A soul whose fading rays with darkness blend.
Better than gold, or praise of royalty,
The heaven-born incense that shall fall on thee,
O priest of pain, as robed in sacred power,
Thou stand'st 'twixt death and life, in such an hour.
A benediction sweeter it shall be
Than all thy dreams of glad futurity.

ALUMNI ASSOCIATION.

The third annual meeting of the Alumni Association of the Hahnemann Hospital College of San Francisco took place at the parlors of Odd Fellows' Hall, at the close of the commencement exercises, Nov. 1st, 1888.

The following graduates were elected members of the Association: Drs. A. B. Wightman, J. D. Chaffee, A. D. Fouchy, E. Mattner, H. Damkroeger, C. L. Guild, J. Nellis, J. A. Ostrander, H. S. Pelton, I. V. Stambach, P. Wagner.

The election of officers for the ensuing year was as follows: President, Florence N. Saltonstall, M. D.; Vice Presi-

dent, E. R. Ballard, M. D.; Secretary, A. G. Bowen, M. D.; Treasurer, J. A. Ostrander; Executive Committee, Drs. John Townsend, I. V. Stambach, C. L. Guild and A. D. Fouchy.

A special meeting of the Society will be held in May for the transaction of important business. Notice of the date and place of meeting will be sent to each Alumnus.

CALIFORNIA STATE HOMŒOPATHIC MEDICAL SOCIETY—SESSION OF 1889.

The following appointments to the chairmanship of the different Scientific Bureaux are announced by the President, S. Powell Burdick, M. D.

Clinical Medicine and Electricity, C. L. Tisdale; Obstetrics, H. L. Bradley; Gynæcology, J. M. Ward; Diseases of Women and Children, J. N. Eckel; Surgery, J. J. Miller; Ophthalmology, Wm. Simpson; Anatomy and Physiology, including Microscopy and Histology, W. A. Dewey; Materia Medica and Provings, Samuel Lilienthal; Medical Education, Statistics and Necrology, H. C. French; Legislation, G. E. Davis.

A. C. PETERSON, Secretary.

NEW LICENTIATES.

The following have been granted licenses to practice by the Homœopathic Board since our last issue:

L. K. Blakeslee, Los Angeles...Hahnemann Medical College of Chicago, 1883
 W. H. Davis, Los Angeles..... University of Michigan, 1882
 Samuel N. Janes, San Francisco...Hahnemann Hospital College, S. F., 1888
 Thomas I. Janes, San Francisco...Hahnemann Hospital College, S. F., 1888
 J. A. Ostrander, Oakland Hahnemann Hospital College, S. F., 1888
 J. G. Nellis, San FranciscoHahnemann Hospital College, S. F., 1888
 H. Damkroeger, San Francisco.....Hahnemann Hospital College, S. F., 1888
 C. L. Guild, Santa Barbara....Hahnemann Hospital College, S. F., 1888
 P. A. Terry, Santa Barbara....Homœopathic Medical College, Missouri, 1879

DRS. GAUTIER & MORGUES have recently called the attention of the French Academy of Sciences to the presence of alkaloids in cod liver oil, some of which are very active in oil that is not fresh.

CORRESPONDENCE.

[The following letter, with comments by "S. L.," is of interest:]

WESTBOROUGH, MASS., October 29, 1888.

SAMUEL LILIENTHAL, M. D.—*Dear Sir:* On picking up the *American Journal of Insanity* for October, 1888, I find under the portion assigned to California, the following paragraph:

"The Hospital for Chronic Insane at Agnew is now definitely expected to receive its first consignment of patients, to the number of four hundred, in November next. The relief to the State Asylums will be only trifling, as both Stockton and Napa have a surplus of five hundred or six hundred patients more than they can properly accommodate. The urgent necessity for additional asylums in the State will be brought before the notice of the Legislature at its pending session."

In view of the fact of their being not accommodation enough for the insane in California, and of a petition going to the Legislature for increased accommodations this coming winter, cannot the Homœopaths in California make an effort to obtain an institution there similar to the Homœopathic institutions built in New York State and here in Massachusetts? They are pushing in this direction now in Pennsylvania; they are already building an institution, I understand, in Minnesota, to be under Homœopathic management; and it was reported to me that Wyoming lost a Homœopathic asylum by only one vote in the Legislature there last Spring.

Very sincerely,

N. EMMONS PAINE.

Per M. J.

We feel grateful to Dr. N. Emmons Paine, the Superintendent of the Westborough Insane Asylum, and formerly first assistant to Dr. Talcott, of the Middleton Insane Asylum, to have led our attention to the duties incumbent upon us at this hour. Only after many severe struggles the New York and the Massachusetts Homœopathic physicians carried their point in the Legislature. In some of the Western States it needs only one or two more efforts to come out victorious, and there ought to be a Homœopathic insane asylum in California as well as in Oregon. Let no side-issues interfere, but let us go, as one man, before our Legislature, and the old-school dare not refuse such a request when the three Allopathic insane asylums of this State are so overfilled that it is impossible to do the poor patients justice. Only lately I had to send insane patients to Napa or Stockton because we had not the opportunity to treat them safely at their own homes, where family influence interferes and becomes injurious, and we have no asylum where they can be treated according to our great law of cure. Hahnemann already long ago led our attention to the paramount value of the mental symptoms in selecting the remedy suitable to the totality of symptoms, and in both Homœopathic insane asylums the increasing number of cures verifies the prediction that Homœopathic treatment is the treatment for mental disorders. My friend and former pupil, Dr. Talcott, glories in the result that narcotics are unknown

in Middletown. We ought to go before our Legislature and demand our right to an asylum for the sake of poor, suffering human beings. It needs only a strong pull, and California, the land of mental hyperæsthesia with its consequent neurasthenia, is just the land where Homœopathy in the treatment of alienation will gain many a glory. Set the ball in motion, and success will be ours.

S. L.

[The following was received from Dr. Schuessler. We translate it for the benefit of our readers—EDITORS.]

DEAR COLLEAGUE—It is encouraging that the cause of biochemistry is spreading so rapidly in America, as is evident from the fact that in so short a space of time fifteen hundred copies of your work have been sold. You seem to believe that former English editions of my work have been published with my sanction, or directly by me, for you say: "Your English translation." That is an error. In regard to the translation by Mrs. Walker, I must say that that edition contains additions, ridiculous indications and erroneous explanations, to which I cannot agree. In regard to the centesimal scale recommended there, I cannot find fault, for in former editions of my work I recommended the same, but for some years I have employed the decimal scale. That it is possible for small doses of my remedies to produce diseases on healthy persons I do not believe; neither do I believe that *small doses of Homœopathic* remedies are able to produce disease. You say that in many cases my remedies work wonderfully, but that in some cases the Homœopathic remedies are to be preferred. That I contest. If my theory is correct, and it is correct, it follows of necessity, since in very many cases my remedies have been acknowledged preferable to the Homœopathic remedies, that this preference must extend to all diseased conditions at all curable with remedies. In this assertion of mine there is no logical error. Failures can only be the negative results of faulty perception of the cases treated. It is necessary to individualize. Let me illustrate with two examples: I was consulted about a rachitic child, which presented a watery, besotted aspect, and whose eyes, so to speak, swam in water. I did not give calc. phos., but natr. mur. A favorable result soon showed itself. An anemia which was characterized by a symptom calling for natr. sulph. was rapidly cured after the administration of this drug.

I beg for further communications on your part.

SCHUESSLER.

THE "British Homœopathic Pharmacopœia" is to be translated into Urdu for the benefit of the native practitioners of India, now, thanks mainly to the Calcutta Homœopathic College, becoming so largely indoctrinated with Homœopathy.

PROFESSOR HAWKES considers rhus tox. the most uncertain remedy in the materia medica in regard to potency, so he frequently prescribes a high and low potency in alternation.

CLINICAL ITEMS.

POSITIVE STATEMENTS OF QUESTIONABLE TRUTH.

Drosera. A single dose of drosera 30 will cure whooping cough in a week.—*Hahnemann.*

Kali Carb. It is rarely that ulcerative pulmonary phthisis can be cured without this antipsoric.—*Hahnemann.*

Plantago. The 2x dilution will cure seven-tenths of all cases of toothache in 15 minutes.—*Reutlinger.*

Plantago. No homoeopathic remedy can compare with plantago in toothache.—*Hale, Hughes, Humphreys, et al.*

Verbascum. Incontinence of urine, cures nearly every case.
Cushing.

Spongia and Lachesis, both at the 30th dilution, are the medicines which control the therapeutics of pleurisy. I should not know how to recommend too earnestly the employment of these two substances. We may remark, by the way, that this treatment, which is also that of peritonitis, seems adapted to inflammation of all serous membranes, with or without effusion.—*Teste.*

Senega.—Soreness of the walls of the chest on moving the arms, particularly the left, with burning pain about the heart.

Melilotus has soreness of pleura with severe cough, great pain in chest, preventing lying on either side.

Agrimonia is an excellent remedy for painful kidneys, usually associated with loss of appetite, impaired digestion, constipated bowels, and in women with wrong of the menstrual function. The tincture in doses of one to ten drops soon corrects this state.

Stannum cures headaches beginning with vertigo, growing worse during several hours and accompanied by nausea and vomiting—also gastralgia, characterized by constrictive pinching pains in the stomach and accompanied by faintness and nausea, especially after a meal. In chronic bronchitis and phthisis, with greenish or offensive expectoration, fatiguing cough morning and evening, with great oppression, chills and night sweats. Cough provoked by lying on right side.

Menyanthes.—Bursting headaches—a sensation of terrible tension in the membranes of the brain. Begins in nape of neck and spreads all over. Relieved by pressure. Feeling as if a weight pressed on the brain. Cold hands and feet.

Phellandrium.—Pain as from a weight on the top of head with aching and burning in the temples and above the eyes, which are congested; eyes water; can bear neither light nor sound.

Antipyrin produces catarrhal symptoms, beginning in nose and passing down into the trachea—*itching and burning in nose and eyes*; catarrhal conjunctivitis—itching and burning in mouth and throat, as well as in skin, especially on the inside of thighs—urticaria.

It ought to prove a homoeopathic remedy for hay fever, asthma and in diseases of the skin, erythema and urticaria, especially in women. Erysipelas and oedematous swellings. Its profuse sweating and sensation of extreme heat over the entire body would call for its use at the climacteric.—*Dr. Decker in N. A. J. of Hom.*

Helonias in 2 drop doses 3 to 4 times daily a specific for the dragging, pulling down sensation in the pelvic region experienced by many women at the menstrual period, or after having been on their feet. The sensation is common to women having uterine prolapsus.—*Chicago Medical Times.*

Natrum Phosph ought to be given to poorly nourished children who are threatened with rachitis and continually pass clay-colored stools. Give 10 grains 4 times daily.

The California Homœopath.

A MONTHLY JOURNAL,

Devoted to the cause of Homœopathy on the Pacific Coast. The only Homœopathic Medical Journal west of the Rocky Mountains.

EDITORS. - - WM. BOERICKE, M. D. and W. A. DEWEY, M. D.

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THE CALIFORNIA HOMOEOPATH, No. 234 Sutter St., San Francisco, Cal.

EDITORIAL NOTES.

WITH this number THE CALIFORNIA HOMŒOPATH finishes its sixth volume and the first as a monthly publication. We need but refer our readers to the index to the present volume that accompanies this number, and let them judge for themselves whether we have come up to our promises. We feel sufficiently encouraged to keep up the monthly issue, and simply wish for the co-operation of all—by subscriptions, articles and advertisements. In some one way, or all, every Homœopathic physician on this Coast can help. In the next volume we shall continue to publish short and practical original articles, translations of the best of foreign medical literature, and practical items of general interest to every practitioner. Our industrious veteran Professor Lilienthal will greatly add to the dignity and character of the next volume by continuing his regular contributions, and we shall pub-

lish in each number one original study in *Materia Medica* by different representative men in our School—leading with one by Professor Leonard, of the Minnesota Medical University. We wish again to especially invite Pacific Coast physicians to give us short, practical contributions in regard to the character and treatment of the diseases of their daily round of professional work.

COLDS, influenza, etc., have furnished the bulk of doctors' patients during the past month, and the epidemic remedy has been the desideratum much to be desired. One physician of large experience has found *aconite*, and later *arum triphyl*, to cure most cases. For ourselves, we found quite satisfactory results from *aralia racemosa*, which seemed to cover most of the symptoms. Our Schuessler apostle in the next room extols ferr. phos. and nat. mur, although we know for a fact that *causticum* 200 had to be called in to clear up the deeper recesses of his bronchial tubes.

WE are going to have a big Homœopathic hospital in this city sometime, judging from the enthusiasm of the Ladies' Aid Society and the bank account as a materialization of that enthusiasm. A very interesting entertainment was given recently for the benefit of the hospital, and during this month a fair will take place, about which particulars are wanting, save that it is to be held at Irving Hall during the first week of the month, and an important feature is to be a daily lunch. We hope every Homœopathic physician in this city will personally interest himself in this method, and go himself as well as urge his patients to do so. You will lose something if you stay away.

PROFESSOR LUDLAM, in speaking of uterine cancer said: "When you have a free flow of pus, you are farthest removed from carcinoma."—*Medical Era*.

DR. A. B. NORTON of New York, alternates ferrum phos and belladonna with excellent results in febrile affections.

Personal Notes, Locations, Etc.

DR. C. F. CLARK has located at Winters, Cal.

DR. L. A. BALLARD has returned, and resumed her practice at 205 Powell street.

MRS. C. L. GUILD, M. D., and IDA V. STAMBACH, M. D., have located at Santa Barbara.

HELEN J. UNDERWOOD, M. D., has located at No. 236 East Santa Clara street, San Jose.

S. H. BOYNTON, M. D., has located at Los Angeles, Cal., and gone into partnership with Dr. Beach.

BENJAMIN HARRISON, our President-elect, and the man we worked for, employs a homœopathic physician.

DR. EDGAR V. VAN NORMAN has permanently located in San Diego, at 943 Sixth street. Residence, Hotel Florence.

DR. E. C. MANNING, of Los Angeles, has removed his residence to "The Ramona," corner of Third and Spring streets.

H. DAMKROEGER, M. D., has opened his office at 312 Page street, San Francisco. He is the resident physician of the Hahnemann Hospital.

PROFESSOR DR. K. K. HOFRATH BAMBERGER, etc., etc., the distinguished Vienna professor, has recently died. He was a great favorite with American students.

P. A. TERRY, M. D., formerly of Wichita, Kansas, has found a new home in San Francisco, where he will pursue the practice of his profession. He is located at — Seventh street.

At the last meeting of the Society of Natural History, of San Diego, DR. GEORGE W. BARNES, who has been President of the Society from its organization in 1874, resigned on account of ill-health. The following resolution was unanimously adopted by the society:

"WHEREAS, DR. GEORGE W. BARNES, who has occupied the office of President of this Society from its organization in 1874 until this time, now declines a re-election on the ground of ill health; therefore, be it

"Resolved, That we express to DR. BARNES the grateful appreciation of this society for his long, faithful and most unselfish labors in its behalf, and tender to him our cordial wishes for his health and happiness."

WE have received the following: "DRS. BARNES, GAMBER & ARNDT. Offices: San Diego, 951 Sixth street; telephone 66, Coronado Beach, Hotel del Coronado. GEORGE WILLIAM BARNES, M. D., Emeritus Professor of *Materia Medica*, and late Professor of *Materia Medica*, Homœopathic Hospital College, Cleveland, Ohio; residence, 951 Sixth street; office practice. B. F. GAMBER, M. D., late Professor of Anatomy and late Professor of Physiology and Hygiene, Homœopathic Hospital College, Cleveland, Ohio; residence, B and Twenty-second streets; telephone 162; surgery and family practice. H. R. ARNDT, M. D., Professor of *Materia Medica* and Therapeutics and Clinical Professor of Nervous Diseases, Homœopathic Medical College of the University of Michigan; editor-in-chief of Arndt's System of Medicine; one of the authors of Hempel and Arndt's *Materia Medica* and Therapeutics; late editor of the *Medical Counselor*, etc.; residence, Hotel del Coronado; diseases of the nervous system and family practice." This makes as strong a team as could be desired.

BOOK REVIEWS.

A Text-Book of Gynæcology. Designed for the Student and General Practitioner. By A. C. COWPERTHWAIT, M. D., Ph. D., LL. D. Chicago: Gross & Delbridge, 1888.

This volume grew out of the author's work as a lecturer on Gynæcology, when he seriously felt the need of a textbook for students that would be systematic in its arrangements, concise in its details and cover the entire list of diseases comprehended by the term Gynæcology, together with their homœopathic treatment. The work as presented seems to us an admirable arrangement and compilation for this purpose. We regret however, that the author depended so much from quotations from other works, which we fear takes away from evenness of style and readableness. The treatment seems to us admirable and rational; the indications for the remedies being clear-cut and concise and local treatment not discarded. The publishers have done their part in giving us a beautiful volume—paper, type and illustrations all being unexceptionable.

Otis Clapp & Sons' Visiting List and Prescription Record. Perpetual. Boston and Providence: Otis Clapp & Son.

Now is the time for looking for new visiting lists and we can do our readers no greater favor than again calling their attention to the one issued by Otis Clapp & Son. It seems to us the best of its kind, elegantly bound and adapted for either 30 or 60 patients. Besides being a record it contains observations on the pulse, temperature, dentition, disinfectants, poisons and other subjects of use for ready reference in such a place.

The Significance of the Epi Blastic Origin of the Central Nervous System. By G. W. JACOBY, M. D. Reprinted from *New York Medical Journal*.

Abdominal Surgery. By H. C. WYMAN, M. D., Physicians Leisure Library
George S. Davis, Detroit, Mich., 1888, 25 cents.

We have received the above, being the first number of the series for 1888, and a most interesting little work it is, going into the subject quite thoroughly. These little books are worth twice their cost; others are to follow, and as we receive them we shall call attention to them.

Report of the Murdock Free Surgical Hospital for Women. Boston,
1888.

POPULAR DEPARTMENT.

THE MANAGEMENT AND CARE OF CHILDREN.

By WILLIAM BOERICKE, M. D.

IX.

INDIGESTION.

The various dyspeptic conditions of infants, from simple indigestion to various forms of bowel trouble, ending with the dreaded cholera infantum, or summer complaint, form by far the most frequent diseases of infants, and it is especially in these diseases where domestic management and intelligent care as to the diet and surroundings of the little sufferer can do more than mere medicine, and without which the best medicinal treatment will be of no avail. Two factors account for the great prevalence of these conditions in infants—namely, first, *the great sensitiveness of the whole digestive tract*, the mucous membrane being exquisitely alive to all foreign impressions so that it will react violently to anything irritating; and secondly—*errors in diet and faulty methods of feeding*. Thus the largest number of dyspeptic victims is punished by the *artificially fed*, because hand feeding, in order to be successful, must be an intelligent and rational procedure. Most frequently it is some form of *starchy* food that first upsets the digestive tract, for it is not until after the fourth month, practically not until the first half year is passed, that the salivary glands enter into functional activity and starchy food needs the presence of saliva for its

perfect digestion, hence if given before this time, it will surely set up a gastric and intestinal catarrh, the chief symptoms of which will be some form of diarrhœa.

Again, cow's milk, unless modified by acting upon the casein, will often prove indigestible. The thick, tough curds cannot be acted upon by the secretions of the infant's stomach and thus are liable to become burdensome ballast, only to be vomited or by fermenting and decaying, produce gases, colic, pain and bowel disturbance. These untoward results of errors in diet are brought about more readily if favored by external circumstances, as for instance, hot weather, unclean surroundings, impurity in air, water, etc.

Now if such a dyspeptic condition goes on unchecked, even for a comparatively short time, it, *in turn*, produces other and very serious symptoms. The whole nervous system becomes depressed on account of the lack of proper nutrition, the child runs down rapidly, wastes away and bye and bye the irritative stage is displaced by an apathetic, listless condition, which is an alarming and dangerous state where some severe acute trouble like pneumonia, may intervene without producing any very marked symptoms. *Secondary disorders*, therefore, are the danger of such a chronic wasting condition and constant vigilance alone on the part of mother and physicians will prevent disaster. The chief *guiding symptoms* that will enable any one to locate the seat of the disease are *vomiting* and the *changed stools*.

The vomiting usually is of the food sour, tough curds, mucus intermixed at times with a little bile.

The stool is changed, both in color and frequency, from its normal, yellow, mushy, slightly acid character. Instead of one or two discharges, we may have as many as twenty per day, frequently half a dozen at least; the consistency is changed, the stools are thinner, watery, containing whitish lumps of undigested milk; often are greenish and offensive. Of course such a state of things soon shows itself in the general appearance of the child. It grows thin, lips blue, nose pointed and cold, extremities cold. In this way a simple dyspepsia soon develops quite alarming symptoms.

The child is apt to smell sour, owing to the acid fermentation of food. It is likely to have *thrush*, especially in warm

weather. This looks like little bits of curd adhering to the tongue, cheeks and lips. Its presence shows a condition unfavorable to the ready assimilation of food. *Attacks of hives* and *red gum* are also certain signs of digestive derangement.

See that every simple diarrhoea is attended to—not suppressed by chalk mixture or opium but cured—by rectifying the diet and giving the appropriate homœopathic remedy.

The best guide to the digestibility of any article of diet, is watching baby's growth in stature and weight and examination of the stools. Remember that mere increase in weight however, is not always the desirable thing it looks to be; the flesh must be firm, not flabby, the skin of that beautiful mottled character so indicative of health. We often see abnormally fat, flabby children after exclusive diet of condensed milk and various starchy foods, but fatness and flabbiness is often associated with rickety bones and a similar condition of the mucous membranes, by which the child takes cold so very readily from the slightest chill or atmospheric impurity.

The treatment of dyspepsia and the consequent gastro-intestinal catarrh and wasting consists mainly in removing the cause and surrounding the little patient with the best possible conditions for his physical comfort and well-being. Look to the food and then to the method of its preparation and administration.

Breast-milk is the only proper food for infants, and practically, there is no safe substitute but good cow's milk prepared to meet the infants' needs, so long as the front teeth are not cut through. *Articles containing starch*, like arrow-root, sago, potatoes, crackers and all patent foods *must not be depended upon as food for very young infants*.

The best treatment for the acute dyspeptic symptoms is to secure *rest* for the stomach and body. If there is continued nausea or retching, teaspoonsful doses of ice water or some effervescing water like German Seltzer may be preferable. The cold water may be followed by small frequent doses of thin barley water, later equal parts of veal broth and barley water, given cold and in small quantities. This can be changed to mutton or chicken broth given in the same way. During this time heat should be applied to abdomen

and extremities, and the child kept perfectly quiet. Then on attempting milk, give it sparingly and freely diluted with barley water. The feeding should be done very cautiously. Never give more than can be digested, in order to prevent fresh irritation and to save the energy both of the digestive organ and the body at large. On returning to milk, it may be necessary to add lime water for a time, especially if there is much acidity. Take at first one part of milk, later, two, and add equal parts of barley water and somewhat less of lime water. If the child is much prostrated, 5 drops of old brandy in a teaspoonful of cold water may have to be given every hour or oftener, but do not administer any achoholic stimulant without your physician's advice, if this is obtainable.

If during the hot weather season a child is suddenly attacked with vomiting, prostration and purging it will be best for you to notify your doctor to call, put the child for a few minutes in a hot bath, then carefully dry it and wrap in warm blankets. Apply heat to extremities and abdomen, and give a drop or two of camphor spirits. An excellent stimulating food can easily be made by beating up the yel-low of one egg with 2 tablespoonfuls of wine and 5 table-spoonfuls of water. This is readily assimilated.

Return very slowly and cautiously to the ordinary diet, relying for a time on some of the gruels. Make a *wheat gruel* by taking 1 teacupful of unbolted flour boiled in 1 quart water for $\frac{3}{4}$ of an hour, strain, season with salt and sugar. This may be thinned so as to pass through a nursing tube and be given from the bottle. A little cream, say a tablespoonful may be added later to increase its nourish-ing qualities and if there be much wasting, add a pulverized hard boiled egg. This may be used as mush and eaten with cream and sugar.

Beef-tea is objectionable as a food in diarrhœa, for it generally acts as a laxative. On the other hand, weak *mutton broth with thoroughly cooked rice* in it is serviceable. So is *clam broth* or the pure juice of the clam slightly cooked.

In diarrhœal affections, on account of the loss of fluids, thirst is usually a prominent feature. Give cool water, toast-water, barley-water frequently. The little patient will want

more than you think it safe to let him have, but try putting only a small quantity in the cup and letting him have the satisfaction of *draining* it, you will accomplish a good deal in the way of satisfying him. Then there is rice-water, almost a necessity in diarrhoea, made best by taking 4 tablespoonfuls of washed rice to 2 quarts of water and boil down to 1 quart. Now add some sugar and a little nutmeg to flavor it. By adding to this one pint of milk you will have a nourishing diet.

Soda Milk is another excellent drink and will remain on the most delicate stomach. One half milk and one half soda water given cool. *Kumyss* is a refreshing and delicious beverage and fills a want often felt in the dietetics of invalids. When children can be persuaded to take it, for they object, as a rule to the sour taste, it is much to be recommended.

Next in importance to the regulation of the food is attention to general hygienic measures.

Pure air is essential.—The confined and polluted air of many rooms, especially in boarding houses and among the poorer classes, in tenements, are productive of the disease. But even in our best houses it is but too often that the nursery and sleeping apartments lack fresh air. Do not let the regulation of the ventilation be in the charge of your servants. See to it yourself, and *never* permit the drying of wet napkins in the rooms where your baby sleeps or plays. Pure cool air acts as a nerve tonic and the warmer the weather, the more important to keep the baby out of doors. Many a little patient with diarrhoea and vomiting, will sleep peacefully and rapidly improve in the fresh, open air, when it but languishes and wastes away within doors. See that the bed is cool and dry. Sometimes a wire-woven mattress, with a soft blanket over it is an agreeable change; or again, a hammock swung in some desirable place will bring comfort not found elsewhere.

Then remember in these dyspeptic conditions the *flannel bandage*. Indeed this should never be taken away until the sixth month and must be kept on so long as the diarrhoea continues. At the same time see that the feet are always warm, and the younger the child the more important this is. Just watch the solid comfort and grateful enjoyment as you

toast baby's toes before an open fire, and every nursery should be provided with such an essential luxury.

Colds are very liable to produce these troubles, especially during first and second periods of dentition, these being the cold catching periods of a child's life. Protect therefrom especially the chest, abdomen, thighs and legs. Include in your baby's outfit an india rubber bag for hot water. By means of it, heat can be given readily in the quickest and most effective way, and many a case of colic relieved without medicine and much crying.

Perfect cleanliness you must insist upon. It is seldom that nurses can be prevailed upon to change the napkins often enough—the very moment it is the least soiled. The parts should be washed each time and dusted with corn starch. This will prevent chafing which would be inevitable, especially if the napkins are not *thoroughly rinsed* and dried before using.

Sponge the entire body in hot weather with cool water once or twice a day. Add a little salt or alcohol. Have the clothing and bed clothing clean, well aired and frequently changed. If the baby is weak and wasted, do not neglect rubbing all over, but especially abdomen, arm pits and soles, with warm sweet oil.

Remedies. Among the many remedies the physician has at his command, there are a few which are frequently indicated among which are *chamom* when the child is very fretful, peevish, has green stools, sour vomiting, much colic, head hot and sweaty, and one cheek red and the other pale.

Ipecac with much vomiting of food and green mucus, stools as if fermented and grass green.

Calcar. is an invaluable medicine for scrophulous or ill nourished children, for protracted teething or defective growth, chronic diarrhoea, *whitish, sour stools* and much sweat on head, feet feel damp, abdomen apt to be large.



